

# *eSentia Systems, Inc.*

## NEW ACCOUNT APPLICATION

For the purpose of establishing credit with ESENTIA SYSTEMS, INC. I, undersigned, warrant the information below to be true, correct and complete to the best of my/our knowledge and hereby authorizes any creditor, bank, lending institution, or any other reference listed herein to furnish ESENTIA SYSTEMS, INC. with any and all information requested. By signing below I also agree to the Terms and Conditions, of ESENTIA SYSTEMS, INC.

Dealer's Signature: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Business Name: _____	Phone #: _____	Fax #: _____
Shipping Address: _____	City, State, and Zip: _____	
Billing Address: _____	City, State and Zip: _____	
Tax ID #: _____	Year Business Opened: _____	E-mail Address: _____

<b>Name of Principal:</b>			
Name: _____	D.L #: _____	State: _____	SS#: _____
Home Address: _____	City, State, and Zip: _____		
Home Phone #: _____	Other Contact Telephone #: _____		

<b>Bank Reference</b>		
Name: _____	Account Number: _____	Phone: _____

<b>Business References (List 3 Active)</b>			
1. Name: _____	Account Number: _____	Fax: _____	Tel: _____
2. Name: _____	Account Number: _____	Fax: _____	Tel: _____
3. Name: _____	Account Number: _____	Fax: _____	Tel: _____

**Guarantee of Payment:** In the event that our account is 15 days past due (45 days from the invoice date), I hereby authorize ESENTIA SYSTEMS, INC. to collect payment using the following credit card. I understand that any payment overdue will incur a finance charge of 30% (0.083% per day) for the invoice(s) or a portion of any invoice which is not paid for when due.

Account Number: \_\_\_\_\_ Exp: \_\_\_\_\_ ( ) Visa/MC ( ) Disc ( ) Amex

Card Identification Number (CID): \_\_\_\_\_  
(3 or 4 digit printed number, not embossed, on the face of the card, or on the back of the card on the signature strip)

Billing Address: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_